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Attorney Docket No.: 020375-002700US

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1/15/05

OWNSEND and TOWNSEND and CREW LLP

Janet L. Newmaker

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Terry Allen-Rouman et al.

Application No.: 09/516,209

Filed: February 29, 2000

For: ELECTRONIC PURCHASE METHOD AND FUNDS TRANSFER

SYSTEM

Examiner: Alain L. Bashore

Art Unit: 3624

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT UNDER 37

CFR §1.97 and §1.98

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

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Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references [excluding cited U.S.Patents, U.S. Patent Application publications, and appropriate IFW-stored, pending U.S. Patent Applications and portions thereof, per 1287 OG 163] are enclosed.

It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

Terry Allen-Rouman et al. Application No.: 09/516,209

Page 2

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

This IDS is being filed before the mailing date of the final Office Action or Notice of Allowance.

Please charge the IDS fee of \$180 to Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

Thomas Franklin Reg. No. 43,616

TOWNSEND and TOWNSEND and CREW LLP Two Embarcadero Center, Eighth Floor San Francisco, California 94111-3834

Tel: 303-571-4000 Fax: 303-571-4321

TDF:nmb

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Substitute for form 1449A/PTO

INFORMATION DISCLOSURE
STATEMENT BY APPLICANT

(use as many sheets as necessary)

Complete if Known

Application Number

Filing Date
Filing Date
First Named Inventor
Art Unit
3624

Examiner Name
Alain L. Bashore

of 2

Sheet

	U.S. PATENT DOCUMENTS+				
		Document Number			
Examiner Initials*	Cite No.1	Number Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	A1	US-5,326,960	07-05-1994	Tannenbaum	
	A2	US-5,350,906	09-27-1994	Brody et al.	
	A3	US-5,825,881	10-20-1998	Colvin, Sr.	
	A4	US-5,903,721	05-11-1999	Sixtus	
	A5	US-6,351,739 B1	02-26-2002	Egendorf	

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	FOREIGN PATENT DOCUMENTS								
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	B1	PCT	WO 99/66436	A1	12-23-1999				
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Application Number	09/516,209	
Filing Date	February 29, 2000	
First Named Inventor	Allen-Rouman, Terry	
Art Unit	3624	
Examiner Name	Alain L. Bashore	
Attorney Docket Number	020375 002700119	

ENCLOSURES (Check all that apply) After Allowance Communication to TC Drawing(s) Fee Transmittal Form Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a After Final **Proprietary Information** Provisional Application Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address Other Enclosure(s) (please identify **Extension of Time Request** Terminal Disclaimer below): Return Postcard, **Express Abandonment Request** Request for Refund Copy of one (1) cited foreign reference, Information Disclosure Statement CD, Number of CD(s) Copies of eleven (11) cited non-patent literature references Landscape Table on CD The Commissioner is authorized to charge any additional fees to Deposit Remarks Certified Copy of Priority Account 20-1430. Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Townsend and Townsend and Crew LLP Signature Printed name Thomas F Reg. No. Date 43,616 DS

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Typed or printed name	Janet L. Neumaker	Date	7/15/05	-

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SUBMITTED BY	X					
Signature	*		Registration No. (Attorney/Agent)	43,616	Telephone	303-571-4000
Name (Print/Type)	Thomas Franklin	,			Date 7/1	5/2005
v						



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STATEMENT BY APPLICANT

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Application Number	09/516,209		
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First Named Inventor	Allen-Rouman, Terry		
Art Unit	3624		
Examiner Name	Alain L. Bashore		
Attomey Docket Number	020375-002700US		

	NON PATENT LITERATURE DOCUMENTS						
Examiner Initials *	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²				
	C1	AUTHOR UNKNOWN "Online Payment Services" www.auctionbytes.com/cab/pages/payment, compiled Nov. 2002, 3 pages.					
	C2	AUTHOR UNKNOWN "PayPal News", www.andrys.com/paypal.html, published prior to 2003, 3 pages.					
-	СЗ	AUTHOR UNKNOWN "PayPal.com Case Study" http://fox.rollins.edu/~slackman/paypal.htm, 2001, 6 pages.					
. 100	C4	BONEH, DAN "Beaming Money by Email is Web's Next killer App", PR Newswire, 16 Nov. 1999, pp. 1-4.					
	C5	BUSINESS EDITORS AND HIGH-TECH WRITERS "billserv.com Launches bills.com, an Internet Portal for Consumers to Pay Bills Online at No Cost" Business Wire, 22 Feb. 2000, pp. 1-2, New York.					
	C6	CONFINITY, INC. "PayPal for the Palm", www.handheldnew.com/file.asp?ObjectID=5401, published prior to Oct. 2003, 2 pages					
	C7	EPPER HOFFMAN, KAREN "PayPal Still Running Free, But the e-payments company's carefree days may be numbered if regulators decide it's essentially a bank" Bank Technology News, published between 2001-2003, www.banktechnews.com/btn/articles/btnoct01-13.shtml, 3 pages.					
	C8	LATOUR, ALMAR "PayPal Electronic Plan May be On the Money in Years to Come", The Wall Street Journal Interactive Edition, 15 Nov. 1999, downloaded from www.paypal.com/html/wsj.html, 2 pages.					
	C9	PLOTKIN, HAL "Beam Me Up Some Cash". Silicon Valley Insider, 8 Sept. 1999, www.halplotkin.com/cnbcs029.htm, 3 pages.					
	C10	STEINER, INA "PayPal Online Payment Service- Another Way to Pay for Auction Items" www.auctionbytes.com, 20 Feb. 2000, 4 pages.					
	C11	WIJNEN, RENE "You've Got Money!", Bank Technology News, June 2000, pp. 1-4, Vol. 13, Issue 6, New York.					
	C12						

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Signature	·	Considered	

^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Applicant's unique citation designation number (optional). Applicant is to place a check mark here if English language Translation is attached.